



**COUNTY OF SAN DIEGO**  
**DEPARTMENT OF PLANNING AND LAND USE: Zoning**  
**PRE-APPLICATION MEETING REQUEST FORM**  
**SUPPLEMENTAL QUESTIONNAIRE FOR MAJOR PROJECTS**

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Please complete this questionnaire to the greatest extent possible. The questionnaire will be used to provide some additional background and information on the project site and operations at the pre-application meeting.

**ENVIRONMENTAL ASPECTS OF PROJECT**

		YES	NO	UNKNOWN
1. LAND USE	Will the project be a land use not presently existing in the surrounding neighborhood?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. AGRICULTURE RESOURCES	Has the property been in any agricultural use within the last 20 years? If yes, please describe below and include the timeframe and use of the land:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. GEOLOGICAL	Are there any identified or suspected geologic hazards on the site or in the immediate area (landslides, subsidence, earthquake faults, slopes > 25%, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. WATER RESOURCES	Does the project propose to use groundwater for any purpose (for example water supply, irrigation, grading)? <i>(Note: If it is stated that the project will not use groundwater for any purpose, the project will be conditioned to either install all necessary public water infrastructure or may be limited from using groundwater)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Are there any existing water wells on the property? If yes, state how many are currently in-use. <i>(Show all wells on site/plot plans or maps)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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		YES	NO	UNKNOWN
4. WATER RESOURCES (con't)	Will the project require new stormwater/drainage facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. AIR QUALITY	Will the project generate smoke, fumes, or odors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. TRAFFIC	Is there any traffic congestion during commute hours at any nearby street intersections providing access to the project that will be substantially affected? If yes, list the intersection(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. BIOLOGICAL RESOURCES	Will the project require the removal of natural vegetation (excluding landscaping and agriculture)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Has the project site been cleared/graded in the past 5 years prior to the submittal of this application? If yes, explain and include details as to the extent, times, and reasons for clearing or Permit Number:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Are there any known or identified unique, rare, threatened, or endangered animals or plants residing on the site or in close proximity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		YES	NO	UNKNOWN
	Are there any existing Biological Open Space Easements on the project site or affected by project improvements off-site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. HAZARDS	Are there any potentially hazardous and/or toxic materials exist on either this site or nearby property? (Examples of hazardous and/or toxic materials include, but are not limited to PCB's; radioactive substances; pesticides and herbicides; fuels, oils, solvents, and other flammable liquids and gases. Also note, underground storage of any of the above.) If yes, explain and list the material(s) and location(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Will the proposed project involve the temporary or long-term use, storage or discharge of hazardous and/or toxic materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Will the project involve the burning of wastes? If yes, explain what materials will be burned:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. NOISE	Will the project cause a substantial change in existing noise levels in the vicinity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Will the project place new residents in an area of current or anticipated high traffic noise or noise from other sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		YES	NO	UNKNOWN
10. UTILITIES AND SERVICES	Does the project propose to have septic or an on-site sewage treatment facility (for example package treatment plants)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Will the project require annexation to any service agency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. AESTHETICS (INCLUDES LANDFORMS)	Will the project be more visible to the public than are its neighbors (larger than average, not screened by landscaping)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Does the property contain natural features of scenic value or rare unique characteristics, including but not limited to trees, rock outcroppings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. CULTURAL AND HISTORICAL RESOURCES	Will the project disturb any archaeological resource such as rock art, grinding and milling features, or artifacts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Will your project involve the demolition or modification of a structure(s) greater than 50 years in age? If yes, explain and supply picture(s) of structure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Are there any existing Archaeological Open Space Easements on the project site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. MISCELLANEOUS	Have all known easements including all easements on the property Title report been shown? ( <i>Show all easements on site/plot plans or maps</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## OFF-SITE IMPROVEMENTS

Describe all of the off-site improvements necessary to implement the project and their points of access or connection to the project site that are *anticipated at this time*:

- |  |  | YES                      | NO                       |
|--|--|--------------------------|--------------------------|
| 1. STREETS                                   | Is the <b>construction of new off-site streets or widening of existing off-site streets</b> proposed?<br>If yes, describe:   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. EXTENSION OF UTILITY LINES                | Is the extension of <b>sewer/water/electric/gas lines</b> proposed? If yes, describe (include distance to the nearest existing lines – in miles or feet, and the location of anticipated connection point: | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. DRAINAGE/<br>STORMWATER/<br>FLOOD CONTROL | Are <b>new off-site drainage/stormwater/flood control facilities or improvements to the existing off-site drainage/stormwater/flood control facilities</b> proposed? If yes, describe:                     | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. PATHS                                     | Are pedestrian and/or bicycle paths proposed?  | <input type="checkbox"/> | <input type="checkbox"/> |

**ANY ADDITIONAL, UNIQUE ISSUES OR CIRCUMSTANCES ASSOCIATED WITH THE PROPOSED SITE OR PROJECT WHICH MAY BE BENEFICIAL FOR DISCUSSION AT THE PRE-APPLICATION MEETING:**